

shown by “**NO**” responses and miscellaneous items listed were noted.

Imminent safety hazards, which are marked with an asterisk (*), create imminent and unreasonable risks of death or severe personal injury. The following steps must be taken to correct the situation:

- Address the violations **IN WRITING** within **24 hours** after receiving the report by completing the attached ISH Repair Notification form showing how and when each noted violation will be corrected. Fax the form to the number given on the front page.
- Correct the violations within **72 hours** after receiving the report, and notify our office **IN WRITING** of such immediately by initialing the bottom of the ISH Repair Notification Form and faxing it to our office again.

All other violations are **non-imminent safety hazards**. The following steps must be taken to correct the situation:

- Correct the violations **by the date given on the front page**.
- Affix a new installation decal over the old one **once all repairs have been made**.
- Complete the attached two-page Plan of Corrective Action (POCA) showing how and when each noted violation was corrected, as well as a Weekly Installation Report indicating what the new decal number is, flagging it so that it is easier to notice.
- Send POCA and the Weekly Installation Report to either the address or fax number given on the front page of this report, to the attention of _____, **MHI**.

Any violations marked with a double asterisk (**) indicate a **repeat violation** from either the first inspection of this same home, or a different home inspected sometime within the past calendar year. At this point, a copy of the report is forwarded to our Office of Legal Counsel for further consideration.

		YES	NO	N/A
1.	If new home, were manufacturer’s installation instructions available? Violation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SITE PREPARATION				
2.	All vegetation has been removed from underneath home as required by installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Proper drainage has been provided per installation instructions to prevent water and moisture from collecting under the home. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Vapor barrier, if required by installation instructions, has been properly installed. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	If skirting is installed, proper ventilation is provided. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUPPORT SYSTEMS		YES	NO	N/A
6.	Footings are of the proper size and construction for soil conditions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Footings are at or below the frost line. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Spacing of piers is in accordance with the installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Pier construction meets installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Marriage line is blocked at all ridge beam support columns. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Piers or other acceptable support is located at all exterior door locations and other large openings as required by installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Pier blocking at fireplaces, recessed entries, porches, etc. has been provided as required by installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Piers are shimmed tight against I-beam. Violation: Reference: Anchor Type:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Anchors are approved for use in Tennessee. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Anchor strap degree of angle per installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Anchors installed to full depth per installation instructions. Violation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Reference:	YES	NO	N/A
17.	Anchor straps wrapped properly at anchor heads with correct number of turns. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Anchor straps installed at I-beam properly. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Anchors are correctly spaced. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	On units with factory installed tie down straps and/or brackets, straps and anchors are installed per installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Stabilizer plates are installed at anchor locations as per anchor manufacturer's installation instructions. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Anchors are within 24 inches of ends of home. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	UTILITIES	YES	NO	N/A
23.	Water supply lines protected from freezing per installation manual requirements. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Correct materials and fittings have been used for waste piping. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	Proper support has been provided on waste piping. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26.	Proper electrical connection between sections was made. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DATA PLATE	YES	NO	
27.	Access was provided to data plate at time of inspection.	<input type="checkbox"/>	<input type="checkbox"/>	

	Note:	YES	NO	
28.	Per 24 CFR § 3280.5(f), home meets Tennessee roof, heating and cooling, and wind zone requirements. Violation:	<input type="checkbox"/>	<input type="checkbox"/>	
	INSTALLATION DECAL	YES	NO	N/A
29.	Per TCA § 68-126-406(g), large installation decal was affixed to appropriate location, if able to check. Violation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
30.	Per TCA § 68-126-406(g), complete, accurate information was provided on interior decal. Violation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
31.	Small installation decal was affixed to exterior location near HUD label. (Decals 35001+ only) Violation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FINISHING	YES	NO	N/A
32.	All duct work, vents, and drain lines are routed to perimeter of home. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
33.	Proper support has been provided on all duct work. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
34.	If damaged, bottom board has been repaired. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
35.	Proper ventilation has been provided in roof. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
36.	On multi-section units, the roof, walls, and floor all appear to have been joined properly. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		YES	NO	N/A
37.	All exterior siding is in place and free of damage. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	ALTERNATIVE CONSTRUCTION UNITS	YES	NO	N/A
38.	Alternative Construction letter approval has been provided. Violation: Reference:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- | | | YES | NO | N/A |
|-----|--|--------------------------|--------------------------|--------------------------|
| 39. | The "Site Inspection Report" was completed prior to application of the installation decal.
Violation:
Reference: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 40. | Homeowner received a copy of the completed "Site Inspection Report" and the "Notice to Purchaser."
Violation:
Reference: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

MISCELLANEOUS VIOLATIONS

OTHERS PRESENT AT TIME OF INSPECTION

The State of Tennessee hereby certifies that as far as can be visually determined, the aforementioned home meets all requirements of State law and the installation method checked on the first page with the exception of the violations noted in this report.

Manufactured Home Installation Inspector's Signature

Date

- Copy sent to:**
- Homeowner →
 - Retailer
 - Installer
 - File Number →
 - Other →